

# Seat of the Soul Institute™

## Journey to the Soul™

### Registration Form

*July 25-29, 2010 ♦ The Resort at The Mountain ♦ Mt. Hood, Oregon*

**Please type in your information, print, sign and mail or fax by the date listed below.**

| <i>PRICES</i>                       |   | Postmarked<br>By Mar 19, 2010 | Postmarked<br>By Jun 1, 2010 | Postmarked<br>After Jun 1, 2010 | <b>Total</b> |
|-------------------------------------|---|-------------------------------|------------------------------|---------------------------------|--------------|
| <b>Double Occupancy<sup>1</sup></b> |   | \$2,055                       | \$2,130                      | \$2,180                         |              |
| <b>Single Occupancy</b>             |   | \$2,310                       | \$2,385                      | \$2,435                         |              |
| <b>Processing Fee</b>               | <input type="checkbox"/> <b>Option A – Pay in full with a check (enter \$0 – no processing fee)</b><br><input type="checkbox"/> <b>Option B – Pay in full with credit/debit card <sup>2</sup> (enter \$0–no processing fee)</b><br><input type="checkbox"/> <b>Option C – \$600 deposit and monthly payments (1<sup>st</sup> of each month) with Credit/debit card<sup>2</sup> (enter \$100 processing fee)</b> |                               |                              |                                 |              |
| <b>Grand Total</b>                  |   |                               |                              |                                 |              |

Prices are in US dollars and include event tuition, lodging for 4 nights, July 25-28, 2010, 12 meals (4 lunches, 4 breakfasts: Monday – Thursday and 4 dinners: Sunday - Wednesday), taxes and gratuities. Travel, snacks, incidentals and additional nights not included.

<sup>1</sup> Two participants per room maximum.

<sup>2</sup> If paying by credit/debit card, please provide information on the Financial Arrangements form.

**DOUBLE OCCUPANCY INFORMATION** (skip this section if you have chosen Participant Single Occupancy)

- I would like to room with the following participant (full name): \_\_\_\_\_
- Please find me a roommate (I understand that if a roommate cannot be found, I will pay the single room extra cost)
- I smoke    I snore    I talk in my sleep    Other: \_\_\_\_\_

**PARTICIPANT INFORMATION**

|                                |  |
|--------------------------------|--|
| Full Name                      |  |
| Name for Nametag               |  |
| Names of anyone else attending |  |
| Mailing Address                |  |
| City                           |  |
| State / Province               |  |
| Postal Code                    |  |
| Country                        |  |
| Home Phone                     |  |
| Cell Phone                     |  |
| Work Phone                     |  |
| Email                          |  |

Send request refunds in writing to the Seat of the Soul Institute (email, fax, or letter): (1) requests received more than 45 days prior to the event will receive a full refund less a \$350 fee; (2) requests received 15-44 days prior to the event will receive a 50% refund or the tuition portion of the amount paid may be applied the following year toward the next five-day Journey event; (3) requests received 14 days or less prior to the event or after the event begins will receive no refund.

Signed \_\_\_\_\_ Date \_\_\_\_\_